## **SECTION 311 REPORT FORM**

The State of South Dakota prefers you use this form for your 311 notification.

This submission is due within 60 days of beginning chemical storage, a change in inventory, or discovery of new hazard information.

Mail one copy of this form to your Local Emergency Planning Committee (LEPC), a second copy to your local Fire Department, and a third copy to the State Emergency Response Commission (SERC) at: SERC- DENR, Joe Foss Building, 523 E. Capitol Ave., Pierre, SD 57501

Circle either "NEW NOTIFICATION" or "REVISED NOTIFICATION"

NEW NOTIFICATION	1			REVISED NOTIFICATION				
Facility Name:								
Mailing Address:								
Mail City, State & Zip:								
Describe Actual facility location	on:							
County where facility is locate	ed:							
	1					T	T	
	Physical and Health Hazards Check all that apply (Required)					Is this a	Maximum	
		Check all	tnat appiy (	Required,	Release	voluntary report ??	Amount Stored	
					of	(not 311	On-site	
Chemical Name	<u>Fire</u>	Reactivity	Chronic	<u>Acute</u>	Pressure	<u>reportable)</u>	(optional)	
Signature			Title (	should be	e owner, op	perator, or ma	anager)	
Dated thisday of								
(Attach additi								
(Attach additi	onal pa	ges as neces	sarv - indi	cate how	many nag	es are in you	submittal)	

## SECTION 311 REPORT FORM (Continuation sheet) Facility Name: Mailing Address: Mail City, State & Zip: Describe Actual facility location: County where facility is located: Physical and Health Hazards Check all that apply (Required) Is this a Maximum Amount voluntary Release report ?? Stored (not 311 On-site of Chemical Name Fire Reactivity Chronic Acute Pressure reportable) (optional) Signature Title (should be owner, operator, or manager) Dated this \_\_\_\_\_\_day of \_\_\_\_\_\_\_\_, 20\_\_\_\_\_\_. Page\_\_\_\_\_ of \_\_

(Attach additional pages as necessary - indicate how many pages are in your submittal)